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Background: The Canadian Medication Appropriateness and Deprescribing Network (CADEn) has been working to enhance the safety and appropriateness of medication use by educating the public, healthcare professionals, and decision-makers. Recognizing the urgency of addressing health disparities in Indigenous communities, in 2023 CADEn prioritized its commitment to Indigenous partnerships and organizational change by acknowledging its shortcomings in this domain.

Methods: A dedicated working group was established to craft a comprehensive report addressing the network's historical context, identifying gaps specifically in Indigenous community engagement, articulating goals and vision, and outlining a 5-year action plan. Emphasizing humility, learning, and relationship building, the plan seeks to foster a culturally safe approach to partnering with Indigenous communities in research and actions that reflect their priorities around medication appropriateness, and give power to Indigenous ways of knowing and doing.

Results: Challenges in the process include determining focal points for outreach among the diverse Indigenous communities, and balancing the need to develop a pan-Indigenous approach while still honoring unique Indigenous community needs and priorities related to medication appropriateness. A meeting grant was prepared to bring together representatives from multiple First Nation communities to discuss medication appropriateness and harm in light of historical wrongs and current policies that often lead to discrimination. Overcoming these challenges, a body of Indigenous-owned testimonials will be compiled through active listening and engagement, shedding light on appropriate medication use in Indigenous communities.

Conclusions: A relational approach to decolonization and Indigenization is necessary to address long-standing inequities in health of First Nation communities in Canada.

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Abstract 106

Exploring volunteer pharmacists' experiences in responding to 2023 Türkiye earthquakes: A qualitative phenomenological study

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Background: Pharmacists are vital in disaster response efforts, dispensing essential medications, managing pharmacy services, consulting, and educating survivors regarding their medications. Their contributions, however, are often underrepresented in scientific literature. This study aimed to explore the experiences of pharmacists who provided volunteer services to meet the pharmaceutical needs of the survivors after two major earthquakes in Türkiye in 2023.

Methods: This study adopted a phenomenological approach. Data were collected using semi-structured interviews. Purposive sampling was used to invite volunteer pharmacists provided pharmaceutical care services to survivors. Interview transcripts were analyzed following an inductive, reflexive thematic analysis.

Results: In total, 15 pharmacists were interviewed. Four main overarching themes “response to the earthquake”, “preparedness for the earthquake”, “experiences during service delivery” and “mental and physical experiences” were developed.

Conclusions: From participants' experiences, it is essential to expand the clinical responsibilities of pharmacists and train them in providing wound care, administering immunization, and prescribing. Pharmacists should be integrated as essential members of disaster health teams. International health organizations, non-governmental organizations, and governments are encouraged to work collaboratively and develop disaster management plans including pharmacists in early responders. This might help mitigate the deficiencies and overcome challenges in healthcare systems to provide effective patient-centered care by health

professionals and respond effectively to disasters.

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Abstract 119

Antipsychotic Prescribing in Ireland: knowledge, attitudes and beliefs of healthcare professionals.

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Background: Antipsychotic medications are clinically effective in managing and treating chronic mental health conditions including psychosis. The side effects of antipsychotics, and specifically, antipsychotic induced weight gain (AIWG) can pose challenges for clinicians and patients and lead to non-adherence and potentially poorer outcomes. Our objective was to investigate the knowledge, attitudes, and beliefs of Healthcare professionals (HCPs) on antipsychotic prescribing in Ireland.

Methods: Participants who have worked/ currently work as a healthcare professional (nurse, doctor, pharmacist) and have had experiences of working with patients being treated with antipsychotic medication were included. Semi-structured interviews were conducted with HCPs using Microsoft Teams from November to December 2023 and were analysed using thematic analysis. Ethical approval to conduct this study was granted by the Social Research Ethics Committee (SREC) at University College Cork (UCC).

Results: Five HCPs (three psychiatrists, two nurses) with an average of 13.6 years experience (range 3-25 years) and a mixture of urban, rural, acute and community settings participated. Two major themes; adherence and decision-making emerged. Sub themes included health literacy, role of gender, and the multidisciplinary team. HCPs described their knowledge of the medication as it related to its effectiveness and seeing the success in ameliorating the positive symptoms of psychosis and contrasted this to the physical health risks, including but not limited to AIWG. HCPs reported on the advantages of a holistic approach to antipsychotic prescribing and valued the input of the multidisciplinary team members.

Conclusions: Antipsychotic prescribing in Ireland is largely initiated by Consultant psychiatrists however the follow up management for many patients is the community setting. Multidisciplinary teams including endocrinologists, pharmacists, in addition to social care professionals, working together for an optimal outcome for the patients mental and physical health would likely lead to more tailored and patient-centered management and care.

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Abstract 130

Exploring Vaccine Hesitancy and Role of Pharmacists as Vaccine Advocates in Rural Wyoming

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Background: Vaccine hesitancy poses a significant challenge to public health, especially in rural areas where misinformation and limited access to healthcare exacerbate the issue. Addressing the multifaceted nature of vaccine hesitancy requires a comprehensive understanding of the underlying beliefs and attitudes that influence health behaviors. This study sought to explore the sociocultural and behavioral factors that contribute to vaccine hesitancy in rural populations, using the Health Belief Model (HBM) as a theoretical framework. This study will serve as a framework for devising an evidence-based, tailored Motivational Interviewing (MI) training program for pharmacists to help increase vaccine confidence in rural populations.